## DECLARATION

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHODS FOR AFFIRMING SWITCHED STATUS OF MEMS-BASED DEVICES the specification of which is attached hereto.

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior	Foreign	Ann	licatio	n(s)

	1	Data of Filing	Priority Claimed Under
Country	Application No.	Date of Filing	35 USC 119
		****	

Application No.	Filing Date	

subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by The first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior application and the national or CT international filing date of this application:

Application No.	Date of Filing	Status

Full Name of Inventor 1:	Last Name: STAPLE	First Name: BEVAN	Middle Name or Initial:	
Residence & Citizenship:	City: Longmont	State/Foreign Country: Colorado	Country of Citizer United States	•
Post Office Address:	Post Office Address: 1059 Button Rock Drive	City: Longmont	State/Country: Colorado	Postal Code: <b>80501</b>
Full Name of Inventor 2:	Last Name: ANDERSON	First Name: Robert	Middle Name or Initial:	
Residence & Citizenship:	City: Boulder	State/Foreign Country: Colorado	Country of Citizenship: United States	
Post Office Address:	Post Office Address: 1011 Rainbow Way	City: Boulder	State/Country: Colorado	Postal Code: 80303

Client Reference No.: PAT-01-029

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 2 Signature of Inventor 1 Bevan Staple 1-25-02 -02 Date Date

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PTO/SB/81 (02-01)

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## Applicati n Numb r Filing Dat Bevan Staple **First Named Inventor POWER OF ATTORNEY OR** METHODS FOR AFFIRMING SWITCHED STATUS OF MEMS-Title **AUTHORIZATION OF AGENT BASED DEVICES Group Art Unit Examiner Name** 19930-006100US **Attorney Docket Number**

I hereby appoi	nt:				
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☐ Applicant/	Inventor.				
Assignee	of record of the entire in	terest. See 37 CFR 3.	.71.		
Statement	under 37 CFR 3.73(b) is	enclosed. (Form PTC	D/SB/96).		
	SI	GNATURE of Applica	nt or Assignee	of Record	
	teven Georgis, Presiden etwork Photogras, Inc.				
Signature		5			
Date	January 28,2	o2.			
NOTE: Signatur	es of all the thventors of	or assignees of recor	d of the entire in	terest or their representativ	e(s) are required.
	forms if more than one form is submitted.	signature is required	i, see below.		

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